STATE OF NEVADA DEPARTMENT OF BUSINESS AND INDUSTRY REAL ESTATE DIVISION

2501 East Sahara Avenue, Suite 102 * Las Vegas, e-mail: realest@red.state.nv.us

NV 89104-4137 * (702) 486-4033 http://www.red.state.nv.us

LOCATION OF RECORDS / TERMINATION / BUSINESS CANCELLED REAL ESTATE BROKER FORM

Name of Broker – (Please Print) License number:			
For the following business, I hereby notify the Real Estate Division that my records required to be maintained pursuant to NRS 645 will be kept in the State of Nevada for 5 years. I understand that I must give written notice to the Real Estate Division of the exact location of these records and may not remove them until the notice of the new location has been received by the Division. NAC 645. 655(4).			
Company Name			
Address location of the records.			
City		State	Zip Code
Additional comments: (example: Records stored in a storage re	ntal, home, another business name	ed ???, etc.)	
Signature	*Home Address		
	*City	State	Zip Code
	*E-mail address		
*Residence or cell phone (*required-will not be sold to third parties)			
Complete below only if your license is no longer associated with the company listed above:			
DISASSOCIATION date and/or resignation:		1.4	· · · · · · · · · · · · · · · · · · ·
Submit this form and original license within 10 calendar days of the date	above. Corporate officers must atta	ach the corporate meet	ting minutes stating

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You must contact the division within 10 days to make changes Forms 507 or 504, or submit Form 506 to voluntary inactivate your license.

that the officers accepted your resignation.